

Dear editor,

First of all, we would like to thank you for taking the time to scrutinize the manuscript "Coexisting tubular adenoma with a neuroendocrine carcinoma of colon allowing early surgical intervention and implicating a shared stem cell origin." We appreciate all the feedback provided by the scientific editor and the peer reviewer, which helps the manuscript become better.

The peer reviewer's comments to authors were as follows:

"In this study, the authors presented a unique case of a large cell high-grade colonic neuroendocrine carcinomas (NECs) of ascending colon that was identified during a routine colonoscopic surveillance, due to its coexistence with a tubular adenoma (TA). The authors concluded that the co-existence of TA with high grade-NEC in this case allowed early identification and intervention of the otherwise asymptomatic but aggressive tumor. The finding of a high-grade NEC within a large TA in this case suggested a link between the two lesions and could represent a shared stem cell origin. Comments: This is an interesting case report. The manuscript is well-written. The reviewer has some minor concerns as follows: 1. The images in Figure 1 are really unclear; especially in A, there is nothing under arrow. 2. The description for Figure 3A and 3B in the Results is lacking."

In order to address the peer reviewer's comments about figure 1A, we enhanced the contrast of the endoscopic picture and added a circle to indicate the ulcerative lesion. This is the best available image of the reported case.

Second, to address the comment about the description of figures 3A and 3B, we added in the appropriate place this statement "In addition to the classic morphology of a high-grade large-cell neuroendocrine carcinoma, the diagnosis was confirmed using immunohistochemical studies showing positive staining of the tumor cells for synaptophysin and chromogranin (Figures 3A and B)", as indicated by the "Add Comment" function of Microsoft Word.

Please feel free to let us know whether you have further concerns.

Again, thank you for your constructive input.

Sincerely,

Qing Zhao, MD, PhD